

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]
[Date]
[Admissions Office]
[Institution Name]
[Institution Address]
[City, State, Zip Code]

Dear Members of the Admissions Committee,

I am writing to express my interest in the Licensed Practical Nurse (LPN) program at [Institution Name]. With a passion for healthcare and a commitment to patient care, I believe that this program will provide me with the essential skills and knowledge to excel in the nursing profession.

[Insert a brief paragraph about your background, including any relevant education, work experience, or personal motivations that led you to pursue a career in nursing. Mention any specific experiences that ignited your passion for helping others.]

I am particularly drawn to [Institution Name] because of [mention any specific aspects of the program that attracted you, such as faculty members, curriculum, clinical opportunities, or the institution's reputation]. I am excited about the possibility of learning from esteemed professionals and gaining hands-on experience that will prepare me for a successful career in nursing.

I am committed to my professional development and eager to contribute to the nursing community. I believe that my dedication, combined with the educational opportunities at [Institution Name], will enable me to make a meaningful impact on the lives of my future patients.

Thank you for considering my application. I look forward to the opportunity to further discuss my qualifications and enthusiasm for the LPN program at [Institution Name].

Sincerely,
[Your Name]